H-4339.1

## HOUSE BILL 3130

State of Washington 59th Legislature 2006 Regular Session

By Representatives Serben, Dunn and Nixon

Read first time 01/23/2006. Referred to Committee on Health Care.

- 1 AN ACT Relating to allowing residents to smoke in long-term care 2 facilities; amending RCW 70.160.030; adding a new section to chapter
- 3 70.160 RCW; and creating a new section.
- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5 NEW SECTION. Sec. 1. The legislature recognizes the will of the people strongly expressed by passage of Initiative Measure No. 901 to 6 7 prohibit smoking in public places and places of employment. A clear 8 message was sent that people do not want to be exposed unwillingly to 9 second-hand smoke. The legislature also finds that the general 10 understanding of Initiative Measure No. 901 is that it did not prohibit people from smoking in their own homes. The public places, covered by 11 Initiative Measure No. 901, was understood to mean such places as 12 13 restaurants, hotels, bars, clinics, and schools, which are used or visited for a relatively brief period. These public places are not the 14 15 homes of the customers or workers. That is not true for one group of people impacted by Initiative Measure No. 901. The initiative defines 16 public places to include adult care private residences and, therefore, 17 it will apply to assisted living facilities, veterans' homes, nursing 18 homes, and adult family homes, places that are the homes of the 19

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1 residents, often for months or years. Some of these residents still

2 smoke, and consider it one of their few remaining "pleasures" in life.

3 Typically they smoke in a separate, ventilated safe room in the

facility. Under Initiative Measure No. 901, these designated smoking

5 rooms are prohibited.

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The legislature has long recognized that residents who live in long-term care facilities should have the opportunity to exercise reasonable control over life decisions, that the right of choice enhances the quality of life for residents, and that residents should not lose their rights because they live in a care facility. Other adult smokers not living in care facilities can, if they wish, smoke at home. After Initiative Measure No. 901, this is no longer a choice for residents living in long-term care facilities.

The legislature also recognizes that the staff at care facilities, and the other residents who do not smoke, should not be exposed unwillingly to second-hand smoke. Some of the current designated smoking areas in long-term care facilities meet acceptable health and safety standards, whereas others may not. The legislature intends to protect the health and safety of residents, staff, and visitors from unwanted second-hand smoke. The legislature also intends to permit smoking by residents who live in long-term care facilities if the facility has an adequate physical barrier and ventilation system to separate the designated smoking area from adjacent nonsmoking areas. The barrier and ventilation system in a facility is adequate if it meets the standards set forth in this act.

- 26 Sec. 2. RCW 70.160.030 and 2006 c 2 s 3 (Initiative Measure No.
- 901) are each amended to read as follows:
- 28 <u>Except as provided in section 3 of this act, no person may smoke in</u>
- 29 a public place or in any place of employment.
- NEW SECTION. Sec. 3. A new section is added to chapter 70.160 RCW
- 31 to read as follows:
- 32 Smoking by residents living in assisted living facilities,
- 33 veterans' homes, boarding homes, nursing homes, and adult family homes
- 34 is permitted in a designated smoking area if the home or facility meets
- 35 the following standards:

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(1) No designated smoking area may be located in a common area including, but not limited to, entrances, lobbies, hallways, dining rooms, activity rooms, and meeting rooms, where employees, visitors, or nonsmoking residents are required to enter or pass through for work, visits, or services.

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- (2) An indoor designated smoking area must be separated by a floor to ceiling physical barrier from adjacent nonsmoking areas. smoking area must be identified clearly with signs. The facility or home must maintain sufficient negative air pressure in the designated smoking area to prevent smoke from migrating into nonsmoking areas. The enclosed smoking area must have a ventilation or filter system or both that meets the permissible indoor air exposure limits for vapor phase nicotine and carbon monoxide, as measured by the stricter of the standards set by the United States department of labor, occupational safety and health administration, the Washington state department of labor and industries, or the Washington state department of health. Facilities and homes whose designated smoking areas met these standards as they existed before the enactment of Initiative Measure No. 901 may continue to use those designated smoking areas. The department of labor and industries and the department of health may review existing rules and adopt new rules if needed to better protect staff, visitors, and nonsmoking residents from second-hand smoke.
- (3) An outdoor designated smoking area must be covered and protected from inclement weather, clearly identified with signs, and reachable by a nonhazardous pathway. The outdoor designated smoking area may be located no closer than fifteen feet from entrances, exits, open windows, and ventilation intakes that serve an enclosed nonsmoking area. The outdoor area must be enclosed on at least two sides to minimize smoke infiltration into the home or facility, and must have an outdoor filter system to absorb smoke when the smoking area is in use.
- (4) Prospective employees and residents must be informed as to whether the home or facility has a designated smoking area. No employee may be required to enter a designated smoking area while someone is smoking there. Cleaning and maintenance of the designated smoking area must not occur when smokers are present. Persons under the age of eighteen are prohibited from entering or performing any

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duties in a designated smoking area.

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